


UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No. 6969.2/103411	
		First Inventor David M. Haaland	
		Title Augmented Classical Least Squares Multivariate Spectral Analysis	
		Express Mail Label No. EV332388219US	
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing.)</small></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> Specification [Total Pages 61] <small>(preferred arrangement set forth below)</small> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 25]</p> <p>5. <input type="checkbox"/> Oath or Declaration [Total Pages 2] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <small>(for continuation/divisional with Box 18 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p>	
ACCOMPANYING APPLICATION PARTS			
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.753(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other:</p>			
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application 10/209,841</p> <p>Prior application information: Examiner: John H. Le Group Art Unit: 2863</p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>			
19. CORRESPONDENCE ADDRESS			
<p><input checked="" type="checkbox"/> Customer Number or Bar Code Label</p>		<div style="border: 1px solid black; padding: 5px;"><p style="text-align: center; margin: 0;">PATENT & TRADEMARK OFFICE</p><p style="text-align: center; margin: 0;">020567</p></div>	
<p>or <input type="checkbox"/> Correspondence address below</p>			
Name		Sandia National Laboratories	
		Intellectual Property Center	
Address		P.O. Box 5800, Mail Stop 0161	
City	Albuquerque, NM 87185	Phone: (505) 284-4784	FAX: (505) 844-2363
Country			
Name (Print/Type)		Kevin W. Bieg, Registration No. 40,912	
Signature		Date: 7/11/03	

19704 U.S. PTO
10/661968
09/11/03

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FEE TRANSMITTAL FOR FY 2003

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement.
Otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

Complete if Known

Application Number	
Filing Date	September 11, 2003
First Named Inventor	David M. Haaland
Examiner Name	
Group / Art Unit	
Attorney Docket No.	SD6969.2/S103411

TOTAL AMOUNT OF PAYMENT (\$1,740.00)

METHOD OF PAYMENT (check one)

The Commissioner is hereby authorized to charge
1. ☒ Indicated fees and credit any over payments to:

Deposit Account Number **19-0131**

Deposit Account Name **Sandia National Labs**

☒ Charge Any Additional
Fee Required Under
37 CFR 1.16 and 1.17

2. Payment Enclosed:

☐ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	750.
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) **\$ 750.00**

2. EXTRA CLAIM FEES

Extra Claims		Fee from below	Fee Paid
Total Claims	61	-20**= 41 X 18.	= 738.
Independent Claims	6	- 3**= 3 X 84.	= 252.
Multiple Dependent			

**or number previously paid, if greater; For Reissues, see below.

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	40	Multiple dependent claim, if not paid
1204	84	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) **(\$)990.**

3. ADDITIONAL FEES (continued)

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee cover sheet	
1053	130			Non-English specification	
1804	920*			Requesting publication of SIR prior to Examiner action	
1805	1,840			Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510			Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	645	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130			Petitions to the Commissioner	
1806	180			Submission of Information Disclosure Stmt	
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (see 37 CFR 1.129(b))	
				Other fee (specify)	
				Other fee (specify)	
				*Reduced by Basic Filing Fee Paid	
				SUBTOTAL (3) (\$)	

SUBMITTED BY

Typed or Printed Name

Kevin W. Bieg

Signature

Kevin W. Bieg

Date

9/11/03

Complete (if applicable)

Reg. Number

40,912

Deposit Account

User ID

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.